

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-C		7/5/01
O.I.P.E. CLASSIFIER		19	7/6/01
FORMALITY REVIEW	H2	712	03-16-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
1	9/2/01
2	✓
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7	✓
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19	✓
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43	✓
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47	✓
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Claim	Date
51	9/18/01
52	✓
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66	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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